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CONFIRMATION NO. 7456

<b>SERIAL NUMBER</b> 10/717,402	<b>FILING OR 371(c) DATE</b> 11/19/2003 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3733	<b>ATTORNEY DOCKET NO.</b> ACM 356
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**APPLICANTS**  
 Randall J. Huebner, Beaverton, OR;

**\*\* CONTINUING DATA \*\*\*\*\*** *OK. AR 8/6/06*  
 This appln claims benefit of 60/427,908 11/19/2002 and claims benefit of 60/512,136 10/17/2003

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*** *None. AR 8/6/06*

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED**  
**\*\* 02/17/2004**

Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Amradhahan</i> Examiner's Signature Initials	<b>STATE OR COUNTRY</b> OR	<b>SHEETS DRAWING</b> 4	<b>TOTAL CLAIMS</b> 32	<b>INDEPENDENT CLAIMS</b> 5
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**ADDRESS**  
23581

**TITLE**  
Deformable bone plates

<b>FILING FEE RECEIVED</b> 1158	<b>FEES:</b> Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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